

Serial No.: 10/709,556

Our File No.: 10008.3858

CERTIFICATE OF MAILING

I HEREBY CERTIFY that the following correspondence: Amendment Transmittal Letter (in Duplicate); Amendment; Terminal Disclaimer to Obviate a Double Patenting Rejection over a "Prior" Patent; a Check in the Amount of \$65.00 for the required fee for the Terminal Disclaimer; and a Return Postcard for confirmation of receipt is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Mail Stop Fee Amendment, Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450, on this 21st day of October, 2005.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further, that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment or both, under Section 1001 of Title 18 of the United States Code.

Any additional charges, including extension of time, please bill our Account No. 13-

1130.

Date: October 21, 2005

MALIN, HALEY & DiMAGGIO, P.A. Customer No. 22235 1936 South Andrews Avenue Fort Lauderdale, Florida 33316 (954) 763-3303 In re Application of Serial No Filed For

ANDERSON, Michael R. 10/709,556 May 13, 2004

DISPENSING CAPSULE FOR A LIQUID CONTAINER

Mail Stop Non-Fee Amendment Commissioner for Patents Alexandria, VA 22313-1450

AMENDMENT TRANSMITTAL LETTER

Sir:

- [X] Transmitted herewith is an amendment in the above-identified application.
- [X] Small entity status of this application under 37 CFR 1.9 and 1.27 has been established by a statement previously submitted.
- [X] No additional fee is required.

The fee has been calculated as shown below:

	(Col. 1)		(Col. 2)	(Col. 3)		
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PAID FOR	PRESENT EXTRA		
TOTAL	* 16	MINUS	** 20	= 0		
INDEP	* 2	MINUS	*** 3	= 0		
FIRST PRESENTATION OF MULTIPLE DEP. CLAIM						

SMALL E	NTITY	OTHER THAN A SMALL ENTITY		
RATE	ADDIT. FEE	OR	RATE	ADDIT. FEE
x\$ 9	\$		x\$18	\$
x\$42	\$ -		x\$84	\$
x\$140	\$		X\$280	\$

TOTAL \$ OR \$

- [] Please charge our Deposit Account No. 13-1130 in the amount of \$. A duplicate copy of this sheet is attached.
- [] A Request for a One-Month Extension of Time together with a check in the amount of \$55.00 for the fee is attached.
- [X] The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 13-1130. A duplicate copy of this sheet is attached.
 - [X] Any filing fees under 37 CFR 1.16 for the presentation of extra claims.
 - Any patent application processing fees under 37 CFR 1.17.
 - [X] If there are any additional charges, including extensions of time, please bill our Deposit Account No. 13-1130.

MALIN, HALEY & DiMAGGIO, P.A. 1936 South Andrews Avenue Ft. Lauderdale, FL 33316 (954) 763-3303

Respectfully submitted,

Barry L. Haley, Reg. No. 25,339